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Kathy Manke Avago Technologies Limited 4380 Ziegler Road				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
Fort Collins, CO 80525				(Depositor's name)			
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APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/826,799 04/15/2004		Marshall Thomas DePue		10030184-1	1464		
TITLE OF INVENTION: OPTICAL DEVICE THAT MEASURES DISTANCE BETWEEN THE DEVICE AND A SURFACE							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1440	\$300	\$0	\$1740	08/18/2008	
EXAM	IINER	ART UNIT	CLASS-SUBCLASS	]			
LEWIS, DAVID LEE		2629	345-166000		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
"Fee Address" ind	ence address or indicatio ondence address (or Cha 3/122) attached. ication (or "Fee Address 2 or more recent) attach	nge of Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
PLEASE NOTE: Uni recordation as set fort (A) NAME OF ASSIG AVAGO Tech	ess an assignee is ident n in 37 CFR 3.11. Comp INEF. INCIOGIES Genera	fied below, no assignes election of this form is NO'  I IP (Singapore) I	(B) RESIDENCE: (CITY Pte. Ltd.	atent. If an assigne assignment.  Yand STATE OR CO	Singa		
Please check the appropri	ate assignee category or	categories (will not be pr	inted on the patent):	Individual 4 Con	poration or other private gro	oup entity Government	
4a. The following fee(s) a  Lissue Fee  Publication Fee (N  Advance Order - #	o small entity discount p		Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 5037/8 (enclose an extra copy of this form).				
a. Applicant claims	us (from status indicated SMALL ENTITY statu	s. See 37 CFR 1.27.			L ENTITY status. See 37 CF		
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Authorized Signature	Scott	1200		Date Aug. 18			
Typed or printed name		revice		Registration No			
					e public which is to file (and inutes to complete, including uments on the amount of tin rademark Office, U.S. Depa SEND TO: Commissioner files a valid OMB control is plays a valid OMB control in the c		